

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Americas Health Insurance Plans PAC (AHIP PAC)

ADDRESS (number and street) ▼

601 Pennsylvania Avenue, NW

South Building, Suite 500

☐ Check if different than previously reported. (ACC)

Washington

DC

20004

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00106740

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☒ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Charles W. Stellar

Signature of Treasurer

Charles W. Stellar

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Americas Health Insurance Plans PAC (AHIP PAC)

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
11 / 01 / 2013 To: M M / D D / Y Y Y Y Y Y
11 / 30 / 2013

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2013		43551.88
(b) Cash on Hand at Beginning of Reporting Period.....	32268.00	
(c) Total Receipts (from Line 19)	10847.70	152698.30
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	43115.70	196250.18
7. Total Disbursements (from Line 31)	14732.07	167866.55
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	28383.63	28383.63
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Americas Health Insurance Plans PAC (AHIP PAC)

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	1		2	0	1	3

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	1		3	0		2	0	1	3

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	5814.36	98279.10
(ii) Unitemized	33.34	9419.20
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	5847.70	107698.30
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	5000.00	45000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	10847.70	152698.30
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	10847.70	152698.30
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	10847.70	152698.30

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	1232.07	2116.55
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1232.07	2116.55
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	13500.00	165500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	250.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	250.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	14732.07	167866.55
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	14732.07	167866.55

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	10847.70	152698.30
34. Total Contribution Refunds (from Line 28(d))	0.00	250.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	10847.70	152448.30
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	1232.07	2116.55
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	1232.07	2116.55

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 43

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Americas Health Insurance Plans PAC (AHIP PAC)

Full Name (Last, First, Middle Initial)

A. Jeremy Allen

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Americas Health Insurance Plans

Occupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1541.64

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2013

Transaction ID : 20131209145255-2

Amount of Each Receipt this Period

83.33

Full Name (Last, First, Middle Initial)

B. Jeremy Allen

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Americas Health Insurance Plans

Occupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1541.64

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 29 / 2013

Transaction ID : 2013120914539-2

Amount of Each Receipt this Period

83.33

Full Name (Last, First, Middle Initial)

C. Chris Anderson

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer
America's Health Insurance Plans (AHIP)

Occupation
Associate-Clinical Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.24

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2013

Transaction ID : 20131209145255-1

Amount of Each Receipt this Period

10.42

SUBTOTAL of Receipts This Page (optional)..... ►

177.08

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 43
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Americas Health Insurance Plans PAC (AHIP PAC)

Full Name (Last, First, Middle Initial)

A. Chris Anderson

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans (AHIP)

Occupation

Associate-Clinical Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.24

Date of Receipt

11 / 29 / 2013

Transaction ID : 2013120914539-1

Amount of Each Receipt this Period

10.42

Full Name (Last, First, Middle Initial)

B. Carmella Bocchino

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Executive Vice President, Clinical Aff

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4166.60

Date of Receipt

11 / 15 / 2013

Transaction ID : 20131209145255-3

Amount of Each Receipt this Period

208.33

Full Name (Last, First, Middle Initial)

C. Carmella Bocchino

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Executive Vice President, Clinical Aff

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4166.60

Date of Receipt

11 / 29 / 2013

Transaction ID : 2013120914539-3

Amount of Each Receipt this Period

208.33

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

427.08

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 43
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Americas Health Insurance Plans PAC (AHIP PAC)

Full Name (Last, First, Middle Initial)

A. Dianne Bricker

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer
America's Health Insurance Plans

Occupation
Regional Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.74

Date of Receipt

11 / 15 / 2013

Transaction ID : 20131209145255-4

Amount of Each Receipt this Period

41.67

Full Name (Last, First, Middle Initial)

B. Dianne Bricker

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer
America's Health Insurance Plans

Occupation
Regional Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.74

Date of Receipt

11 / 29 / 2013

Transaction ID : 2013120914539-4

Amount of Each Receipt this Period

41.67

Full Name (Last, First, Middle Initial)

C. Kathleen Callanan

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer
America's Health Insurance Plans

Occupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1666.60

Date of Receipt

11 / 15 / 2013

Transaction ID : 20131209145255-5

Amount of Each Receipt this Period

83.33

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

166.67

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 43
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Americas Health Insurance Plans PAC (AHIP PAC)

Full Name (Last, First, Middle Initial)

A. Kathleen Callanan

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1666.60

Date of Receipt

11 / 29 / 2013

Transaction ID : 2013120914539-5

Amount of Each Receipt this Period

83.33

Full Name (Last, First, Middle Initial)

B. Winthrop Cashdollar

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Executive Director Product Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1375.00

Date of Receipt

11 / 15 / 2013

Transaction ID : 20131209145255-6

Amount of Each Receipt this Period

62.50

Full Name (Last, First, Middle Initial)

C. Winthrop Cashdollar

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Executive Director Product Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1375.00

Date of Receipt

11 / 29 / 2013

Transaction ID : 2013120914539-6

Amount of Each Receipt this Period

62.50

SUBTOTAL of Receipts This Page (optional)..... ►

208.33

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 10 OF 43

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Americas Health Insurance Plans PAC (AHIP PAC)

Full Name (Last, First, Middle Initial)

A. Yvonne Chanatry

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Vice President, Marketing and Graphics

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2291.74

Date of Receipt

11 / 15 / 2013

Transaction ID : 20131209145255-7

Amount of Each Receipt this Period

104.17

Full Name (Last, First, Middle Initial)

B. Yvonne Chanatry

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Vice President, Marketing and Graphics

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2291.74

Date of Receipt

11 / 29 / 2013

Transaction ID : 2013120914539-7

Amount of Each Receipt this Period

104.17

Full Name (Last, First, Middle Initial)

C. Rebecca Cole

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Director, Public Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

687.50

Date of Receipt

11 / 15 / 2013

Transaction ID : 20131209145255-9

Amount of Each Receipt this Period

31.25

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

239.59

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 43

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Americas Health Insurance Plans PAC (AHIP PAC)

Full Name (Last, First, Middle Initial)

A. Rebecca Cole

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Director, Public Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

687.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 29 / 2013

Transaction ID : 2013120914539-9

Amount of Each Receipt this Period

31.25

Full Name (Last, First, Middle Initial)

B. Kirstin Dawson

Mailing Address 602 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Senior Research Associate, Clinical Po

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.24

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2013

Transaction ID : 20131209145255-11

Amount of Each Receipt this Period

10.42

Full Name (Last, First, Middle Initial)

C. Kirstin Dawson

Mailing Address 602 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Senior Research Associate, Clinical Po

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.24

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 29 / 2013

Transaction ID : 2013120914539-11

Amount of Each Receipt this Period

10.42

SUBTOTAL of Receipts This Page (optional)..... ►

52.09

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 12 OF 43

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Americas Health Insurance Plans PAC (AHIP PAC)

Full Name (Last, First, Middle Initial)

A. Gregory Dean

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Executive Director Insurance Education

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1375.00

Date of Receipt

11 / 15 / 2013

Transaction ID : 20131209145255-12

Amount of Each Receipt this Period

62.50

Full Name (Last, First, Middle Initial)

B. Gregory Dean

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Executive Director Insurance Education

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1375.00

Date of Receipt

11 / 29 / 2013

Transaction ID : 2013120914539-12

Amount of Each Receipt this Period

62.50

Full Name (Last, First, Middle Initial)

C. Randolph Desonia

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Director, Medicaid Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

11 / 15 / 2013

Transaction ID : 20131209145255-13

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

135.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 13 OF 43

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Americas Health Insurance Plans PAC (AHIP PAC)

Full Name (Last, First, Middle Initial)

A. Randolph Desonia

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Director, Medicaid Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

11 / 29 / 2013

Transaction ID : 2013120914539-13

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

B. Mary Beth Donahue

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Executive VP, Policy & Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4166.60

Date of Receipt

11 / 15 / 2013

Transaction ID : 20131209145255-14

Amount of Each Receipt this Period

208.33

Full Name (Last, First, Middle Initial)

C. Mary Beth Donahue

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Executive VP, Policy & Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4166.60

Date of Receipt

11 / 29 / 2013

Transaction ID : 2013120914539-14

Amount of Each Receipt this Period

208.33

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

426.66

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 14 OF 43
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Americas Health Insurance Plans PAC (AHIP PAC)

Full Name (Last, First, Middle Initial)

A. Katie Dunning

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.74

Date of Receipt

11 / 15 / 2013

Transaction ID : 20131209145255-15

Amount of Each Receipt this Period

41.67

Full Name (Last, First, Middle Initial)

B. Katie Dunning

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.74

Date of Receipt

11 / 29 / 2013

Transaction ID : 2013120914539-15

Amount of Each Receipt this Period

41.67

Full Name (Last, First, Middle Initial)

C. Daniel Durham

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Executive Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4583.26

Date of Receipt

11 / 15 / 2013

Transaction ID : 20131209145255-16

Amount of Each Receipt this Period

208.33

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

291.67

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 15 OF 43

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Americas Health Insurance Plans PAC (AHIP PAC)

Full Name (Last, First, Middle Initial)

A. Daniel Durham

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Executive Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4583.26

Date of Receipt

11 / 29 / 2013

Transaction ID : 2013120914539-16

Amount of Each Receipt this Period

208.33

Full Name (Last, First, Middle Initial)

B. Paul Eiting

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Deputy Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

843.80

Date of Receipt

11 / 15 / 2013

Transaction ID : 20131209145255-17

Amount of Each Receipt this Period

41.67

Full Name (Last, First, Middle Initial)

C. Paul Eiting

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Deputy Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

843.80

Date of Receipt

11 / 29 / 2013

Transaction ID : 2013120914539-17

Amount of Each Receipt this Period

41.67

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

291.67

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 16 OF 43

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Americas Health Insurance Plans PAC (AHIP PAC)

Full Name (Last, First, Middle Initial)

A. Kathryn Gallagher

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Policy Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.24

Date of Receipt

11 / 15 / 2013

Transaction ID : 20131209145255-18

Amount of Each Receipt this Period

10.42

Full Name (Last, First, Middle Initial)

B. Kathryn Gallagher

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Policy Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.24

Date of Receipt

11 / 29 / 2013

Transaction ID : 2013120914539-18

Amount of Each Receipt this Period

10.42

Full Name (Last, First, Middle Initial)

c. Candy Gallaher

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.74

Date of Receipt

11 / 15 / 2013

Transaction ID : 20131209145255-19

Amount of Each Receipt this Period

41.67

SUBTOTAL of Receipts This Page (optional)..... ►

62.51

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 17 OF 43

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Americas Health Insurance Plans PAC (AHIP PAC)

Full Name (Last, First, Middle Initial)

A. Candy Gallaher

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.74

Date of Receipt

11 / 29 / 2013

Transaction ID : 2013120914539-19

Amount of Each Receipt this Period

41.67

Full Name (Last, First, Middle Initial)

B. Leanne Gassaway

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Regional Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

595.76

Date of Receipt

11 / 15 / 2013

Transaction ID : 20131209145255-20

Amount of Each Receipt this Period

27.08

Full Name (Last, First, Middle Initial)

C. Leanne Gassaway

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Regional Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

595.76

Date of Receipt

11 / 29 / 2013

Transaction ID : 2013120914539-20

Amount of Each Receipt this Period

27.08

SUBTOTAL of Receipts This Page (optional)..... ►

95.83

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 18 OF 43

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Americas Health Insurance Plans PAC (AHIP PAC)

Full Name (Last, First, Middle Initial)

A. Cynthia Goff

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

BlueCross and BlueShield of Minnesota

Occupation

Executive Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

937.50

Date of Receipt

11 / 15 / 2013

Transaction ID : 20131209145255-21

Amount of Each Receipt this Period

62.50

Full Name (Last, First, Middle Initial)

B. Cynthia Goff

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

BlueCross and BlueShield of Minnesota

Occupation

Executive Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

937.50

Date of Receipt

11 / 29 / 2013

Transaction ID : 2013120914539-21

Amount of Each Receipt this Period

62.50

Full Name (Last, First, Middle Initial)

C. Wendy Henson

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Deputy Director, Human Resources

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

11 / 15 / 2013

Transaction ID : 20131209145255-22

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

135.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 19 OF 43

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Americas Health Insurance Plans PAC (AHIP PAC)

Full Name (Last, First, Middle Initial)

A. Wendy Henson

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Deputy Director, Human Resources

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

11 / 29 / 2013

Transaction ID : 2013120914539-22

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

B. Joni Hong

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Senior Associate Counsel, Special Proj

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

687.50

Date of Receipt

11 / 15 / 2013

Transaction ID : 20131209145255-23

Amount of Each Receipt this Period

31.25

Full Name (Last, First, Middle Initial)

C. Joni Hong

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Senior Associate Counsel, Special Proj

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

687.50

Date of Receipt

11 / 29 / 2013

Transaction ID : 2013120914539-23

Amount of Each Receipt this Period

31.25

SUBTOTAL of Receipts This Page (optional)..... ►

72.50

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 OF 43
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Americas Health Insurance Plans PAC (AHIP PAC)

Full Name (Last, First, Middle Initial)

A. Burt Hudson

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Deputy Director, Client Learning Servi

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.74

Date of Receipt

11 / 15 / 2013

Transaction ID : 20131209145255-24

Amount of Each Receipt this Period

41.67

Full Name (Last, First, Middle Initial)

B. Burt Hudson

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Deputy Director, Client Learning Servi

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.74

Date of Receipt

11 / 29 / 2013

Transaction ID : 2013120914539-24

Amount of Each Receipt this Period

41.67

Full Name (Last, First, Middle Initial)

C. Crystal Kuntz

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1416.61

Date of Receipt

11 / 15 / 2013

Transaction ID : 20131209145255-27

Amount of Each Receipt this Period

83.33

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

166.67

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 21 OF 43

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Americas Health Insurance Plans PAC (AHIP PAC)

Full Name (Last, First, Middle Initial)

A. Crystal Kuntz

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1416.61

Date of Receipt

11 / 29 / 2013

Transaction ID : 2013120914539-27

Amount of Each Receipt this Period

83.33

Full Name (Last, First, Middle Initial)

B. Barbara Lardy

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Senior Vice President, Clinical Affair

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.74

Date of Receipt

11 / 15 / 2013

Transaction ID : 20131209145255-28

Amount of Each Receipt this Period

41.67

Full Name (Last, First, Middle Initial)

C. Barbara Lardy

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Senior Vice President, Clinical Affair

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.74

Date of Receipt

11 / 29 / 2013

Transaction ID : 2013120914539-28

Amount of Each Receipt this Period

41.67

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

166.67

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 22 OF 43

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Americas Health Insurance Plans PAC (AHIP PAC)

Full Name (Last, First, Middle Initial)

A. Jeff Lemieux

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Svp, Center for Health Policy & Resear

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

11 / 15 / 2013

Transaction ID : 20131209145255-29

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

B. Jeff Lemieux

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Svp, Center for Health Policy & Resear

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

11 / 29 / 2013

Transaction ID : 2013120914539-29

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

C. Beth Leonard

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Senior Director Public Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1833.26

Date of Receipt

11 / 15 / 2013

Transaction ID : 20131209145255-30

Amount of Each Receipt this Period

83.33

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

333.33

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 OF 43

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Americas Health Insurance Plans PAC (AHIP PAC)

Full Name (Last, First, Middle Initial)

A. Beth Leonard

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Senior Director Public Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1833.26

Date of Receipt

11 / 29 / 2013

Transaction ID : 2013120914539-30

Amount of Each Receipt this Period

83.33

Full Name (Last, First, Middle Initial)

B. Holly Macmoran

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Program Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.26

Date of Receipt

11 / 15 / 2013

Transaction ID : 20131209145255-31

Amount of Each Receipt this Period

20.83

Full Name (Last, First, Middle Initial)

C. Holly Macmoran

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Program Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.26

Date of Receipt

11 / 29 / 2013

Transaction ID : 2013120914539-31

Amount of Each Receipt this Period

20.83

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

124.99

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 OF 43
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Americas Health Insurance Plans PAC (AHIP PAC)

Full Name (Last, First, Middle Initial)

A. Amber Manko

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Administrative Assistant, Federal Affa

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

334.62

Date of Receipt

11 / 15 / 2013

Transaction ID : 20131209145255-32

Amount of Each Receipt this Period

15.21

Full Name (Last, First, Middle Initial)

B. Amber Manko

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Administrative Assistant, Federal Affa

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

334.62

Date of Receipt

11 / 29 / 2013

Transaction ID : 2013120914539-32

Amount of Each Receipt this Period

15.21

Full Name (Last, First, Middle Initial)

C. Debi Manning

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Director of Human Resources

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

11 / 15 / 2013

Transaction ID : 20131209145255-33

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

50.42

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 25 OF 43

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Americas Health Insurance Plans PAC (AHIP PAC)

Full Name (Last, First, Middle Initial)

A. Debi Manning

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Director of Human Resources

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

11 / 29 / 2013

Transaction ID : 2013120914539-33

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. Anthony Meoni

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Vice President, IT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

11 / 15 / 2013

Transaction ID : 20131209145255-35

Amount of Each Receipt this Period

10.50

Full Name (Last, First, Middle Initial)

C. Anthony Meoni

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Vice President, IT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

11 / 29 / 2013

Transaction ID : 2013120914539-35

Amount of Each Receipt this Period

10.50

SUBTOTAL of Receipts This Page (optional)..... ►

41.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 OF 43
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Americas Health Insurance Plans PAC (AHIP PAC)

Full Name (Last, First, Middle Initial)

A. Thomas Meyers

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Executive Director Product Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

11 / 15 / 2013

Transaction ID : 20131209145255-36

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. Thomas Meyers

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Executive Director Product Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

11 / 29 / 2013

Transaction ID : 2013120914539-36

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

C. Joseph Miller

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2291.74

Date of Receipt

11 / 15 / 2013

Transaction ID : 20131209145255-37

Amount of Each Receipt this Period

104.17

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

144.17

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 OF 43

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Americas Health Insurance Plans PAC (AHIP PAC)

Full Name (Last, First, Middle Initial)

A. Joseph Miller

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2291.74

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 29 / 2013

Transaction ID : 2013120914539-37

Amount of Each Receipt this Period

104.17

Full Name (Last, First, Middle Initial)

B. Julie Miller

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Senior Associate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1229.19

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2013

Transaction ID : 20131209145255-38

Amount of Each Receipt this Period

62.50

Full Name (Last, First, Middle Initial)

C. Julie Miller

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Senior Associate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1229.19

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 29 / 2013

Transaction ID : 2013120914539-38

Amount of Each Receipt this Period

62.50

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

229.17

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 28 OF 43

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Americas Health Insurance Plans PAC (AHIP PAC)

Full Name (Last, First, Middle Initial)

A. Lisa Miller

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Deputy Director, Meeting Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.24

Date of Receipt

11 / 15 / 2013

Transaction ID : 20131209145255-39

Amount of Each Receipt this Period

10.42

Full Name (Last, First, Middle Initial)

B. Lisa Miller

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Deputy Director, Meeting Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.24

Date of Receipt

11 / 29 / 2013

Transaction ID : 2013120914539-39

Amount of Each Receipt this Period

10.42

Full Name (Last, First, Middle Initial)

C. Martin Mitchell Jr.

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Director Product Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.26

Date of Receipt

11 / 15 / 2013

Transaction ID : 20131209145255-40

Amount of Each Receipt this Period

20.83

SUBTOTAL of Receipts This Page (optional)..... ►

41.67

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 OF 43

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Americas Health Insurance Plans PAC (AHIP PAC)

Full Name (Last, First, Middle Initial)

A. Martin Mitchell Jr.

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Director Product Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.26

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 29 / 2013

Transaction ID : 2013120914539-40

Amount of Each Receipt this Period

20.83

Full Name (Last, First, Middle Initial)

B. Teresa Mulligan

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Executive Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.76

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2013

Transaction ID : 20131209145255-8

Amount of Each Receipt this Period

14.58

Full Name (Last, First, Middle Initial)

C. Teresa Mulligan

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Executive Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.76

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 29 / 2013

Transaction ID : 2013120914539-8

Amount of Each Receipt this Period

14.58

SUBTOTAL of Receipts This Page (optional)..... ►

49.99

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 30 OF 43

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Americas Health Insurance Plans PAC (AHIP PAC)

Full Name (Last, First, Middle Initial)

A. Susan Pisano

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Vice President Strategic Communication

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2956.58

Date of Receipt

11 / 15 / 2013

Transaction ID : 20131209145255-41

Amount of Each Receipt this Period

134.39

Full Name (Last, First, Middle Initial)

B. Susan Pisano

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Vice President Strategic Communication

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2956.58

Date of Receipt

11 / 29 / 2013

Transaction ID : 2013120914539-41

Amount of Each Receipt this Period

134.39

Full Name (Last, First, Middle Initial)

C. Lawrence Platt

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1833.26

Date of Receipt

11 / 15 / 2013

Transaction ID : 20131209145255-42

Amount of Each Receipt this Period

83.33

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

352.11

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 31 OF 43

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Americas Health Insurance Plans PAC (AHIP PAC)

Full Name (Last, First, Middle Initial)

A. Lawrence Platt

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1833.26

Date of Receipt

11 / 29 / 2013

Transaction ID : 2013120914539-42

Amount of Each Receipt this Period

83.33

Full Name (Last, First, Middle Initial)

B. Mark Pratt

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

11 / 15 / 2013

Transaction ID : 20131209145255-43

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

C. Mark Pratt

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

11 / 29 / 2013

Transaction ID : 2013120914539-43

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

333.33

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 OF 43
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Americas Health Insurance Plans PAC (AHIP PAC)

Full Name (Last, First, Middle Initial)

A. Ingrid Reeves

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Vice President, Membership

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.26

Date of Receipt

11 / 15 / 2013

Transaction ID : 20131209145255-45

Amount of Each Receipt this Period

20.83

Full Name (Last, First, Middle Initial)

B. Ingrid Reeves

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Vice President, Membership

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.26

Date of Receipt

11 / 29 / 2013

Transaction ID : 2013120914539-45

Amount of Each Receipt this Period

20.83

Full Name (Last, First, Middle Initial)

C. Lisa Shreve

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Senior Vice President, Professional Pr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.74

Date of Receipt

11 / 15 / 2013

Transaction ID : 20131209145255-46

Amount of Each Receipt this Period

41.67

SUBTOTAL of Receipts This Page (optional)..... ►

83.33

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 OF 43

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Americas Health Insurance Plans PAC (AHIP PAC)

Full Name (Last, First, Middle Initial)

A. Lisa Shreve

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Senior Vice President, Professional Pr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.74

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 29 / 2013

Transaction ID : 2013120914539-46

Amount of Each Receipt this Period

41.67

Full Name (Last, First, Middle Initial)

B. Charles Stellar

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Executive V.P.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2291.74

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2013

Transaction ID : 20131209145255-48

Amount of Each Receipt this Period

104.17

Full Name (Last, First, Middle Initial)

c. Charles Stellar

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Executive V.P.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2291.74

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 29 / 2013

Transaction ID : 2013120914539-48

Amount of Each Receipt this Period

104.17

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250.01

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 34 OF 43
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Americas Health Insurance Plans PAC (AHIP PAC)

Full Name (Last, First, Middle Initial)

A. Kristin Stewart Smoot

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

AHIP

Occupation

Manager, Special Projects

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.26

Date of Receipt

11 / 15 / 2013

Transaction ID : 20131209145255-49

Amount of Each Receipt this Period

20.83

Full Name (Last, First, Middle Initial)

B. Kristin Stewart Smoot

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

AHIP

Occupation

Manager, Special Projects

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.26

Date of Receipt

11 / 29 / 2013

Transaction ID : 2013120914539-49

Amount of Each Receipt this Period

20.83

Full Name (Last, First, Middle Initial)

C. Rachel Terry

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Senior Director, Business Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.45

Date of Receipt

11 / 15 / 2013

Transaction ID : 20131209145255-50

Amount of Each Receipt this Period

20.83

SUBTOTAL of Receipts This Page (optional)..... ►

62.49

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 35 OF 43

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Americas Health Insurance Plans PAC (AHIP PAC)

Full Name (Last, First, Middle Initial)

A. Rachel Terry

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Senior Director, Business Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.45

Date of Receipt

11 / 29 / 2013

Transaction ID : 2013120914539-50

Amount of Each Receipt this Period

20.83

Full Name (Last, First, Middle Initial)

B. Aaron Tucker

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Senior Legislative & Regulatory Analys

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.24

Date of Receipt

11 / 15 / 2013

Transaction ID : 20131209145255-51

Amount of Each Receipt this Period

10.42

Full Name (Last, First, Middle Initial)

C. Aaron Tucker

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Senior Legislative & Regulatory Analys

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.24

Date of Receipt

11 / 29 / 2013

Transaction ID : 2013120914539-51

Amount of Each Receipt this Period

10.42

SUBTOTAL of Receipts This Page (optional)..... ►

41.67

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 OF 43
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Americas Health Insurance Plans PAC (AHIP PAC)

Full Name (Last, First, Middle Initial)

A. Claudia Tucker

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Regional Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

11 / 15 / 2013

Transaction ID : 20131209145255-52

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Claudia Tucker

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Regional Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

11 / 29 / 2013

Transaction ID : 2013120914539-52

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Kathleen Turner

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Senior Manager of Visual Communication

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

11 / 15 / 2013

Transaction ID : 20131209145255-53

Amount of Each Receipt this Period

12.50

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

112.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 37 OF 43

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Americas Health Insurance Plans PAC (AHIP PAC)

Full Name (Last, First, Middle Initial)

A. Kathleen Turner

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Senior Manager of Visual Communication

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

11 / 29 / 2013

Transaction ID : 2013120914539-53

Amount of Each Receipt this Period

12.50

Full Name (Last, First, Middle Initial)

B. Mark Van Koevering

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Executive Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1833.26

Date of Receipt

11 / 15 / 2013

Transaction ID : 20131209145255-54

Amount of Each Receipt this Period

83.33

Full Name (Last, First, Middle Initial)

C. Mark Van Koevering

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Executive Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1833.26

Date of Receipt

11 / 29 / 2013

Transaction ID : 2013120914539-54

Amount of Each Receipt this Period

83.33

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

179.16

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 OF 43
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Americas Health Insurance Plans PAC (AHIP PAC)

Full Name (Last, First, Middle Initial)

A. Brenda Weigel

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer
America's Health Insurance Plans

Occupation
Digital Media Coordinator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

354.13

Date of Receipt

11 / 15 / 2013

Transaction ID : 20131209145255-55

Amount of Each Receipt this Period

20.83

Full Name (Last, First, Middle Initial)

B. Brenda Weigel

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer
America's Health Insurance Plans

Occupation
Digital Media Coordinator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

354.13

Date of Receipt

11 / 29 / 2013

Transaction ID : 2013120914539-55

Amount of Each Receipt this Period

20.83

Full Name (Last, First, Middle Initial)

C. Marilyn Zigmund Luke

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer
America's Health Insurance Plans

Occupation
Senior Counsel and Compliance Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

11 / 15 / 2013

Transaction ID : 20131209145255-56

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)..... ►

51.66

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 OF 43
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Americas Health Insurance Plans PAC (AHIP PAC)

Full Name (Last, First, Middle Initial)

A. Marilyn Zigmund Luke

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Senior Counsel and Compliance Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

11 / 29 / 2013

Transaction ID : 2013120914539-56

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

B. Robert Zirkelbach

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Press Secretary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2291.74

Date of Receipt

11 / 15 / 2013

Transaction ID : 20131209145255-57

Amount of Each Receipt this Period

104.17

Full Name (Last, First, Middle Initial)

C. Robert Zirkelbach

Mailing Address 601 Pennsylvania Avenue N.W.
Suite 500, South Building

City Washington State DC Zip Code 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

America's Health Insurance Plans

Occupation

Press Secretary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2291.74

Date of Receipt

11 / 29 / 2013

Transaction ID : 2013120914539-57

Amount of Each Receipt this Period

104.17

SUBTOTAL of Receipts This Page (optional)..... ►

218.34

TOTAL This Period (last page this line number only)..... ►

5814.36

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 40 OF 43

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Americas Health Insurance Plans PAC (AHIP PAC)

Full Name (Last, First, Middle Initial)

A. Mvp Health Care Inc. Federal PAC

Mailing Address 625 State Street

City State Zip Code
 Schenectady NY 12305

FEC ID number of contributing
federal political committee.

C C00431429

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

11 / **12** / **2013**

Transaction ID : 2E8585D440E0453DB3B2

Amount of Each Receipt this Period

5000.00

2013 Contribution

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5000.00

5000.00

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Americas Health Insurance Plans PAC (AHIP PAC)

Category/
Type

31.66

Category/
Type

State: District:

Amount of Each Disbursement this Period

1168.75

Category/
Type

State: District:

1232.07

1232.07

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 42 OF 43

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americas Health Insurance Plans PAC (AHIP PAC)

Full Name (Last, First, Middle Initial)

A. Friends of Schumer

Mailing Address 192 Lexington Avenue Suite 1001

City	State	Zip Code
New York	NY	10016

Purpose of Disbursement
2016 Primary

011

Candidate Name

Charles E. SchumerCategory/
Type

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: NY District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2013

Transaction ID : E76444962BB5342F0BB

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Kurt Schrader for Congress

Mailing Address PO Box 3314

City	State	Zip Code
Oregon City	OR	97045

Purpose of Disbursement
2014 Primary

011

Candidate Name

Kurt SchraderCategory/
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: OR District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2013

Transaction ID : EE0EF8D50DFECBA104

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Marco Rubio for US Senate

Mailing Address PO Box 140420

City	State	Zip Code
Miami	FL	33114

Purpose of Disbursement
Funds Allocated from Contribution to Rubio Victory Committee (C00494617)

011

Candidate Name

Marco Antonio RubioCategory/
Type

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: FL District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2013

Transaction ID : 9CF7E6BEC694953DE0D

Amount of Each Disbursement this Period

2000.00

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 43 OF 43

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americas Health Insurance Plans PAC (AHIP PAC)

Full Name (Last, First, Middle Initial)

A. Reclaim America PAC

Mailing Address 228 S Washington St Ste 115

City	State	Zip Code
Alexandria	VA	22314

Purpose of Disbursement
Funds Allocated from Contribution to Rubio Victory Committee (C00494617)

Candidate Name

Reclaim America PACOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2013

☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Contribution

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2013

Transaction ID : 43FA4F6A338FB2BFF72

Amount of Each Disbursement this Period

3000.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Rubio Victory Committee

Mailing Address 228 S Washington Street Suite 115

City	State	Zip Code
Alexandria	VA	22314

Purpose of Disbursement
2013 Contribution

Candidate Name

Rubio Victory CommitteeOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2013

☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Contribution

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2013

Transaction ID : CF1EFD34364E052F247

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Titus for Congress

Mailing Address PO Box 72454

City	State	Zip Code
Las Vegas	NV	89170

Purpose of Disbursement
2014 Primary

Candidate Name

Alice C. Dina TitusOffice Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

State: NV District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		20		2013

Transaction ID : 2B523ECE2F0BA22BA3A

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6000.00

13500.00
